PETITION DRIVE POLITICAL COMMITTE For Office Use Only STATE OF ARIZONA CITY OF TUCSON CAMPAIGN FIN CITY OF TUCSON RECEIVED Address aug 30 Sponsoring Organization and Office Name of Candidate and Office Sought (if applicable) E-Mail Address Fax # REPORTING PERIOD (Please check appropriate box) FILING DEADLINE 60 Days after the Date of Issuance of Petition Number by City Clerk: For Period of _____ _____ through ☐ June 30 Report For Period of Date Ending of First Report through May 31, 2007*July 2, 2007 At the time of filing a petition filed more than sixty (60) days after the date of issuance. Thirty (30) days after the filing of the petition, except that in any case where the petition drive political committee that applied for a petition or petition number files additional signatures in response to the city clerk's certificate stating that an insufficient number of signatures has been filed with the petition, the statement shall be filed thirty (30) days after the deadline for filing additional signatures. In the case of any petition not filed with the city clerk within the deadline for filing established by the Tucson Charter or Tucson Code, all petition drive political committees shall file campaign finance reports twenty (20) days after the expiration of said deadline. Pre-Primary Election Post-Primary Election For Period of August 23, 2007 through October 1, 2007October 11, 2007 Pre-General Election Post General Election

January 31 Report

Other

	UMMARY	Column A Total This Reporting Period	Column B Election Period To Date
5a Surplus from Previous Campa filed for the new committee)	ign (or at time Statement of Organization was		i dia dia dia dia dia dia dia dia dia di
5b Cash on Hand at Beginning of	this Reporting Period	652 54	
5c Total Receipts (from correspo Summary Page, Line 8)	nding columns on Detailed	140400	96/7/4
5d Subtotal (add Lines [b] and [a] and [c] for Column B)	c] for Column A and add lines	2056 54	1001.11
filed for the new committee) other lines)	om Previous Campaign Committee at od (or at time Statement of Organization was (Do not add or subtract this line from the		
6b Total Disbursements (from consummary Page, Line 18)	orresponding columns on Detailed	1362 00	anima 4
	porting Period (Subtract Line 6b ist equal Column B)	694-54	1019107

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DETAILED SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

1. Committee Name			3. ID#	
2. Report Covering Period Fr	om	Thru		
	RECEIPTS		COLUMN A THIS PERIOD	COLUMN B CAMPAIGN TO DATE
 Contributions other than loan 	s and in-kind:		PROPERTY OF THE PROPERTY OF	
(a) Individuals - more than \$			746,06	4115.14
	25 or less (Total from Schedule A-1)		658.00	3594,00
(c) Political Committees (Tot		1110111		
(d) Subtotal Contributions		1404.00		
(e) Refund of Contributions	Total from Schedule F-2)	· · · · · · · · · · · · · · · · · · ·		
(f) Total contributions Other	er than Loans and In-kind (subtract 4(e)	from 4(d)]	<u> </u>	
5. (a) Loans made or guarante	ed by candidate (Total from Schedule C)_	 	·	<u> </u>
(b) All other loans (Total from	n Schedule C-1)			2000
(c) Total loans [add 5(a) an	d 5(b)]			
6. In-kind contributions (Total fr	om Schedule E)	_		
7. Dividends, interest, and othe	r forms of receipts (Total from Schedule F-	1)		
8. TOTAL Receipts [add 4(f)	, 5(c), 6, and 7]	1404,00		
	DISBURSEMENTS			
9. Expenditures for Operating	Expenses (Total from Schedule D)		49462	
10. Independent Expenditures (Total from Schedule D-1)		•	
11. Value of In-kind expenditure	s (Total from Schedule E)			
12. Loans made by reporting co	mmittee (Total from Schedule D-2)			
13. (a) Repayment of loans ma	de or guaranteed by candidate (Total from	Schedule D-4)		
(b) Repayment of all other	ioans (Total from Schedule D-5)			
(c) Total Loan Repaymen	ts [add 13(a) and 13(b)]	-		
14. Transfers to other political c	ommittees (Total from Schedule D-6)			-
15. Any other disbursement (To	tal from Schedule D-7)			
16. Subtotal disbursements [a	dd lines 9, 10, 11, 12, 13(c), 14, and 15]			
17. Rebates, refunds and other	offsets to operating expenses (Total from S	Schedule D-3)		
18. TOTAL disbursements [subtract line 17 from line 16]	+94.62		
19.Total Outstanding Debts owe	ed by Reporting Candidate or Political Com	m. (Schedul é ∖F-3)∏	CIL A	2000.00
1	erjury, that I have examined the contents of	this campat៉ូពូក្ល ពីភ្នំគ្នាល	ce report and to the b	est of my
knowledge and belief it is t	rue and complete.			
Type or Print Name of Treasurer	Victoria Finley	30 PA:13	OUA 7	
Signature of Treasurer or Candidate	or Designating Individual:	' . משאו	BECE	Date /2 / 10
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	Committee Name ENOUGH!	· [3. ID#	
1.	ALIC	iru AUF		
 4. 	Report Covering Period from PUC C T	DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
a.	STREET ADDRESS 717 N. 10TH AVE	8/21	50	
b.	OCCUPATION MER EMPLOYER SELF LAST LAST PIRST DALE MI	·		
	STREET ADDRESS 2640 5, COTTENWOID W #25 CITY TUCGUN AZ 85713 OCCUPATION EMPLOYER	8/22	50 OFFICE CHYC	CITY OF RECEI
C.	LAST SMITH MARLENE STREET ADDRESS 3 438 E. CAMDEN CITY TUCSON STATE A2 85217/6. OCCUPATION EMPLOYER	8/22	Z8 Z8	UCSON VED V
d.	SMITH MELVENA STREET ADDRESS 6071 E. 27 TH CITY TUCSON STATE AZ 85711	8/16	28	lamor
е	CDET M	8/12	250	
5	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE A [If last page of Schedule A, transfer total to Detailed Summary Page line 4(a), Column A] *If contributions of \$25 or less are listed with contributor's name, address do not include them on Schedule A-1.	s, occupation and e	746 mployer on Schedule A	200 2
F	do not include them on serieude //		Schedule A Page _	

CONTRIBUTIONS FROM INDIVIDUALS* (More than \$25)*

	Committee Name ENOUEM	3. ID#	
•	Cottituates status	,	
2. 4.	Report Covering Period from	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
a.	STREET ADDRESS 325 N, RIDGE DR 8/8 CITY TUCSON STATE AV 657/6 OCCUPATION EMPLOYER	35	
b.	STREET ADDRESS 29/0 E, CALLE GLORIETTI) 8/8 CITY TUCSUN, AT 21P 85 7/6 OCCUPATION EMPLOYER	30	
c.	LAST FF VOR FIRST DAVIP MI STREET ADDRESS 5 F. GOLD DUST DR 8/1/ CITY TUCSON, AV 219857// OCCUPATION EMPLOYER	40	
d.	STREET ADDRESS 47 E GTH ST 8/13	35	
9	STREET ADDRESS STATE OCCUPATION FIRST DAVID FIRST MI PAY FIRST MI PAY A STATE A FIRST MI PAY A STATE A FIRST MI A STATE A FIRST MI STATE A STATE A FIRST MI STATE A STATE STATE A STATE A STATE STATE A STATE A STATE ST	200	300
	5. ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE & V d UE SIN & [If last page of Schedule A, transfer total to Detailed Summary Page line 4(a), Column A]		
	*If contributions of \$25 or less are listed with contributor's name. Address 30 upation and do not include them on Schedule A-1.	d employer on Schedule A Schedule A Page _	1 01 2

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CONTRIBUTIONS of \$25 or Less - AGGREGATE TOTAL*

SCHEDULE A-1

1.	Committee Name	ENOUGH	•	3, ID#	
	Report Covering Period from	AUG 6	thru .	AUG 2-2	,

Aggregate Total of Contributions of \$25 or Less

- Inti-	Amour Receive This Perio	d i	•	Cumulative Total This Campaign To Date
HZ CONTRIBO			OFFICE OF THE	CITY OF TUE
				250N D P4:13
. TOTAL THIS PERIOD ransfer total to Detailed Summary Page, (b), Column AJ	Line 65	6. CUMULATIVE TOTAL T [Transfer total to Detailed Sur Line 4(b), Column B]	THIS CAMPAIGN TO D mmary Page,	3594

^{*}If contributions of \$25 or less are listed with contributors name and address on Schedule A, do not include them on this schedule.

EXPENDITURES FOR OF	PERATING EXPENS	SES* S	CHEDULE D
EXPENDITURES FOR OF		. ID#	
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Report Covering Period from:AU	5 - "" /\ VO	DATE	AMOUNT
EXPENDITURES		EXPENDITURE	OF THE
NAME AND ADDRESS TO WHOM EXPENDITURE (DISBURSE	MENT) WAS MADE	MADE	EXPENDITURE
NAME, ADDRESS, CITY, STATE AND ZIP OFFICE		8-17	41,00
US, POST OFFICE 85	226	8-20	246.00
TUCSON, AZ 85	116	CHECK#	
DESCRIPTION OF ITEMS OR SERVICES PURCHASED POSTAGE			
b. NAME, ADDRESS CITY STATE AND ZIP CITY CLE	ERK	8-13	
CLTY HALL	85701		177,50
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		CHECK#	
DESCRIPTION OF ITEMS OR SÉRVICES PURCHASED - BALLOT			
C. NAME, ADDRESS, CITY, STATE AND ZIP			
860 E. BROADN	1AY 857/9	8-20	30.12
DESCRIPTION OF ITEMS OR SERVICES PURCHASED		CHECK#	
DESCRIPTION OF WEING STREET		<u> </u>	
d. NAME, ADDRESS, CITY, STATE AND ZIP			
U. INCHES CONTROL OF THE PARTY			
		CHECK#	- .
DESCRIPTION OF ITEMS OR SERVICES PURCHASED			
			
e. NAME, ADDRESS, CITY, STATE AND ZIP		-	
DESCRIPTION OF ITEMS OR SERVICES PURCHASED	,	CHECK#	,
		<u> </u>	
f. NAME, ADDRESS, CITY, STATE AND ZIP	•		1
	<u> </u>	CHECK#	
DESCRIPTION OF ITEMS OR SERVICES PURCHASSION OR SERVICES PURCHASSION OF ITEMS OR SERVICES PURCHASSION OF ITEMS OR SERVICES PURCHASSION OR SERVICES	0EI		
THE PAGE OF SCHEDULE D			1/01/11
5. ENTER TOTAL ONLY IF LAST PAGE OF SCHOOL INTERPRETATION OF SCHOOL INTO THE LAST PAGE OF SCHOOL INTO T	ge, Li <mark>ne 9,</mark> Column Al		1777.60
· [the second second second	esulting in credit.	

*Expenditures, other than a contract, promise or agreement to make an expenditure resulting in credit.

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Schedule D Page ____ of ____